SUMMARY OF CAMPAIGN CONTRIBUTIONS AND EXPENSES

00 PRIMARY AND GENERAL ELECTIONS	State of Ne
ONNIE PHILIMAN WESD TRUSTE	Te D
andidate's Name(print) ONNIE / ULLIMAN WESD / BUSTE	District (if applicable)
55 CircleDr Reno, NV 89500	786.6432
ailing Address (include city and zip code)	Telephone Number
REPORT NUMBER 3 - DUE Report Period Begins: Octo Report Period Ends: January	ober 26, 2000
CONTRIBUTIONS SUN	MMARY
1. From Report Numbers 1 and 2, total amount of contribution	ons in excess of \$100 \$450
2. From Report Numbers 1 and 2, total amount of contributi	ions of \$100 or less
3. Report Number 3, total amount of contributions in excess	
4. Report Number 3, total amount of contributions of \$100 c	or less
From Report Numbers 1, 2, and 3, actual number of	\mathbf{f}
contributions of \$100 or less/	
6. Interest and income earned, if any, during this report perio	od
7. TOTAL AMOUNT OF ALL CONTRIBUTIONS	<u> </u>
(add lines 1 through 6)	1031 45
EXPENSES SUMMA	RY
8. From Report Numbers 1 and 2, total amount of expenses in	n
excess of \$100	
9. From Report Numbers 1 and 2, total amount of expenses	of\$100
or less	<u></u>
10. Report Number 3, total amount of expenses in excess of \$	<u> </u>
11. Report Number 3, total amount of expenses of \$100 or les	
12. TOTAL AMOUNT OF ALL EXPENSES	4
(add lines 7 through 11)	<u>#140</u>
contributions or expenses are listed during this Report Period	d, only this page of the report needs to be file
filing officer.	
I declare under penalty of perjury that the foregoing is true ar	nd correct.
Executed on //16/00 Files	Signature of Candidate
ed by Secretary of State 1A 120, 294A.200	/
03(rev 04/00) Total nu	umber of pages for this report $\underline{\hspace{1cm}} \varphi$

JONNIE PHILIPPA	WED TRUSTEE	\triangleright
Candidate's Name (print)	Office	District (if applicable)

Contributions in Excess of \$100 or, When Added Together Exceed \$100

CONTRIBUTOR'S NAME AND ADDRESS	DATE(S) OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION(S)	CHECK / IF LOAN	CHECK / IF IN KIND

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PAGE 2 OF 6

Candidate's Name (print)	Office	District (if applicable)
JORNIE PULLINAN	COLSD PRUSTEE	

Contributions of \$100 or less

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION		DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION
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JONNIE PULLIMAN WESTEE

Candidate's Name (print)

Office

District (if applicable)

Expenses Categories

CATEGORIES	CODE	TOTALS
Office expenses	A	0
Expenses related to volunteers	В	
Expenses related to travel	С	
Expenses related to advertising	D	
Expenses related to paid staff	E	· .
Expenses related to consultants	F	
Expenses related to polling	G	· · · · · · · · · · · · · · · · · · ·
Expenses related to special events	Н	
Goods and services provided in kind for which money would otherwise have been paid	I	
Other miscellaneous expenses	J	

PAGE 4 OF 6

adidate's Name (print) Office District (if applicable)					
Ex	penses in Excess	s of \$100			
NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)		DATE(S) OF EACH EXPENSE	AMOUNT(S) OF EACH EXPENSE		
			0		

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	Service Pucconan	CC50/	- Rusie E	$\langle \rangle$	
Č	andidate's Name (print)	Office	District (i	if applicable)	
	Expens	es of \$100 or L	ess		

Expenses of \$100 or Less

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